I Denise R Murray am writing this to claim that I am the original inventor of this product and that there is no other product of its kind that I know of at this time: 01/07/02.

Deruse Murray

Declaration for Utility or Design Patent Application

As a below- named inventor, I hereby declare that my resid nce, post office and citizenship are as stated below next to my name and I believe that I am the original, first ,and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention ,the specifications of which is attached hereto and which has the following title.

"EDGE-IT"

I have reviewed and understand the contents of the above- specification, including the claims, as amended by any amendment specifically referred to in the oath or declaration. I acknowledge a duty to disclose information which is material to the examination of this application.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, Section 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Please send correspondence and make telephone calls to the First Inventor below.

	Denese				
Print Name: DENISE LENEE	MURRAY	Date:	nil 15/)2013	,
Print Name: DENISE LENEE Legal Residence: California		Citizen of	:United	State	_ S
Post Office Address: 1130			_		
Folsom	95	54300			
Telephone: (alle) 993-72	37				

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DEGLADATION FOR UTILITY OF	Attorney Docket Numbe	1	
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	Devise R. MURRay	
PATENT APPLICATION	COMPLETE IF KNOWN		
(37 CFR 1.63)	Application Number		
Declaration Submitted With Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date	1-7-02	
	Art Unit	·	
	Examiner Name		

As the below named inventor, I her	reby declare that:					
My residence, mailing address, and c	itizenship are as stated bek	ow next to my name.				
I believe I am the original and first inv	entor of the subject matter	which is claimed and for wh	ich a patent is sou	ght on the invention entitled:		
EDGE-IT						
the specification of which	(Title of the I	Invention)		l		
is attached hereto						
OR was filed on (MM/DD/YYYY)	01-07-0	as United States A	Application Number	or PCT International		
Application Number	and was amend	ded on (MM/DD/YYYY)		(if applicable).		
I hereby state that I have reviewed and any amendment specifically referred to		of the above identified speci	ification, including the	he claims, as amended by		
I acknowledge the duty to disclose info applications, material information whici international filing date of the continual	ch became available betwee	o patentability as defined in on the filing date of the prior	37 CFR 1.56, inclu application and the	iding for continuation-in-part e national or PCT		
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
Additional foreign application nur	mbers are listed on a supple	emental priority data sheet f	PTO/SB/02B attact	ned hereto:		

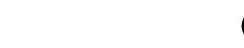
[Page 1 of 2]

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Numbe or Bar Code Labe		OR K Cor	respondence address below
Name Devise R.	MUR	RAY	
Address 1130 DucHow	way	#	7
city Folson	State	ca	zip 95630
Country Wited States Tele	ephone 96-983	3-7237	Fax
I hereby declare that all statements made herein of my or are believed to be true; and further that these statement made are punishable by fine or imprisonment, or both, ur validity of the application or any patent issued thereon.	ts were made with the ki	nowledge that willful false	statements and the like so
NAME OF SOLE OR FIRST INVENTOR :	A petition has be	en filed for this unsig	ned inventor
Given Name (first and middle [if any])		ly Name Bed	uely
Inventor's Denuse Mun	ay	•	Date 01-07-02
(Sacramento) Residence: City Folsom	state ca	Country U.5.	amenica W Citizenship
Mailing Address //30 DucHo	w way	# 7	
city Folson	State C9	ZIP 95630	Country U.S.
NAME OF SECOND INVENTOR:	A petition has been	n filed for this unsigne	ed inventor
Given Name (first and middle [if any])		y Name mame	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City Additional inventors are being named on thesup	State pplemental Additional Inve	ZIP entor(s) sheet(s) PTO/SB/	Country 02A attached hereto.

The first of the state of the s



PTO/SB/01 (10-01) Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.						
2501 4247	011 F00 11711 1717 00	Attorney Docket Numb	er			
DECLARATION FOR UTILITY OR DESIGN		First Named Inventor	Devise R. Muzray			
PATENT APPLICATION (37 CFR 1.63)	COMPLETE IF KNOWN /					
	Application Number					
Declaration	Declaration	Filing Date	12-28-01			
Submitted OR Submitted after Initial with Initial Filing (surcharge	Art Unit .					
Filing	(37 CFR 1.16 (e)) required)	Examiner Name				

	Filing	· · · · · · · · · · · · · · · · · · ·	required)	Examiner Name		
As	As the below named inventor, I hereby declare that:					
My residence, mailing address, and citizenship are as stated below next to my name.						
l be	elieve I am the origina	l and first inv	rentor of the subject matter w	hich is claimed and for wh	ich a patent is sou	ght on the invention entitled:
		E	DGE	<u> </u>	- T	
_			(Title of the In	vention)		
the	specification of which	ו				
L.	is attached hereto)				
K	OR was filed on (MM/D	(ייייאספס	12-28-0)	as United States A	pplication Number	or PCT International
Арр	elication Number 3	7 CFR	1.63 and was amende	d on (MM/DD/YYYY)	2-28-0	(if applicable).
l hei any	reby state that I have amendment specifica	reviewed and lly referred to	d understand the contents of above.	the above identified speci	fication, including t	he claims, as amended by
appi	ications, material info	mation which	ormation which is material to h became available betweer tion-in-part application.	patentability as defined in the filing date of the prior	37 CFR 1.56, incluance application and the	uding for continuation-in-part e national or PCT
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
	Prior Foreign Applie Number(s)	cation	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
	Additional foreign ap	polication nur	nbers are listed on a supplei	mental priority data sheet F	TO/SR/02B attach	ned hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Numbe or Bar Code Labe		OR Cor	теspondence address below
Name Devise R. 1	MURRA	14	
Address 1130 Duc Hou		Pay #7	
city Folsom		State Ca.	zip 95630
		983-7237	Fax
I hereby declare that all statements made herein of my or are believed to be true; and further that these statement made are punishable by fine or imprisonment, or both, ur validity of the application or any patent issued thereon.	ts were made with	the knowledge that willful false	statements and the like so
NAME OF SOLE OR FIRST INVENTOR :	A petition ha	as been filed for this unsign	ned inventor
Given Name (first and middle [if any]) De Nise Re		Family Name MURA	eay
Inventor's Signature			Date
speramento county Residence: City Folsom	State Ca.	Country MA.	Citizenship U.S.
Mailing Address 1130 Ducto	w wa	44 -	
city Folsom	State Ca.		Country
NAME OF SECOND INVENTOR:	A petition has	been filed for this unsigne	ed inventor
Given Name (first and middle [if any])		Family Name or Sumame	
Inventor's Signature		/.	Date
Residence: City	State	Country	Citizenship
Mailing Address	:		
City		ZIP	
	State oplemental Additiona	al Inventor(s) sheet(s) PTO/SB/	Country 02A attached hereto.

PTO/SB/01A (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Title of Invention 806E 1					
As the below named inventor(s), I/we declare that:					
This declaration is directed to:					
The attached application, or					
☐ Application No. 37 CFR. 1.63, filed on 12-28-01					
as amended on(if applicable);					
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;					
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;					
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF INVENTOR(S)					
Inventor one: Devise Revee MURRay					
Signature: * UND MUNOUS Citizen of: United States					
Inventor two:					
Signature: Citizen of:					
Inventor three:					
Signature: Citizen of:					
Inventor four:					
Signature: Citizen of:					

Additional inventors are being named on ____additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

City

Please type a plus sign (+) inside this box ——— Under the Paperwork Reduction Act of 1995, no persons a	ere required to rest	U.S. Patent and Trade	emark Office: I	PTO/SB/02A (11-00) hrough 10/31/2002. OMB 0651-0032 U.S. DEPARTMENT OF COMMERCE t contains a valid OMB control number
DECLARATION	TE TOWN OF TE	JOHN TO B CONTROL	ADDITIO	DNAL INVENTOR(S) plemental Sheet
	ī			
Name of Additional Joint Inventor, if ar	ıy:	A petition has be	een filed for	this unsigned inventor
Given Name (first and middle [if any])	Fami	ily Name or	Surname
Inventor's Signature		· 		Date
Residence: City	State	Country	/	Citizenship
Mailing Address				
Mailing Address			· · · · · · · · · · · · · · · · · · ·	
City	State	ZIP	Count	try
Name of Additional Joint Inventor, if any:				
Given Name (first and middle [if any]) Family Name or Sumame				
Inventor's Signature	7			Date
Residence: City	State	Country		Citizenship
Mailing Address				
Mailing Address				
City	State	ZIP	Cot	untry
Name of Additional Joint Inventor, if ar	ıy:	☐ A petition has been	n filed for this	s unsigned inventor
Given Name (first and middle [if any])	1	F	amily Name	or Surname
<u> </u>				
Inventor's Signature				Date
Residence: City	State	Country		Citizenship
Mailing Address				
Mailing Address	·· -			
		i '	ľ	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

ZIP

Country

State

Please type a plus sign (+) inside this box	
---	--

CHANGE OF THE

PTO/SB/02B (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Supplemental Priority Data Sheet

Additional foreign app Prior Foreign Application Number(s)		Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
		,		
		,		
	*			
·				
·		:		
	;			
	,			
,				
·				

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

I Denise R. Murray would like to get a patent for this product that I have invented. I have already been through submission for product search with INVENTION SUBMISSION CORPORATION and they said there was no other product like this one. Please see paperwork inside. Also I think I included all the information that you need ,I don't know if it is all right or not please write to me if it isn't done correctly. Thank you.